


U.S. Department of Justice
United States Marshals Service

12/05/07 **PROCESS RECEIPT AND RETURN**

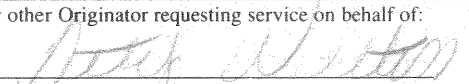
See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

| | |
|--|---------------------------------------|
| PLAINTIFF Jermaine Montiel | COURT CASE NUMBER 7-5490HRL |
| DEFENDANT Officer M. Williams, et al | TYPE OF PROCESS **See below |
| SERVE  AT | |
| NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Officer Hernandez, Badge #3898 | |
| ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 201 W. Mission Street, San JOse, CA 95110 | |


| | | |
|--|---|----------|
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: | Number of process to be served with this Form - 285 | 6 |
| Anthony Boskovich 28 North First Street Suite 600 San Jose, CA 95138-1210 | Number of parties to be served in this case | 4 |
| | Check for service on U.S.A. | |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):
Fold Fold

1. Complaint and Civil Cover Sheet
2. Application to Proceed In Forma Pauperis
3. ADR Scheduling Order
4. Order re Application to Proceed In Forma Pauperis


| | | | |
|---|--|---|---------------------------|
| Signature of Attorney or other Originator requesting service on behalf of: Betty Walton  | <input type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT | TELEPHONE NUMBER 408-535-5513 | DATE 11/27/2007 |
|---|--|---|---------------------------|

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|---------------|-------------------------------------|------------------------------------|--|-------------------------|
| I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) | Total Process | District of Origin No. 11 | District to Serve No. 11 | Signature of Authorized USMS Deputy or Clerk  | Date 12/05/07 |
|---|---------------|-------------------------------------|------------------------------------|--|-------------------------|

I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

| | |
|--|--|
| Name and title of individual served (if not shown above) Officer Maria Jimenez | <input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. |
| Address (complete only if different than shown above) | Date of Service 12/19/07 Time 1330 pm |
| | Signature of U.S. Marshal or Deputy  |

| | | | | | | |
|-------------------------------|---|----------------|---------------------------------|------------------|--|------------------|
| Service Fee \$45.00 | Total Mileage Charges (including endeavors) | Forwarding Fee | Total Charges \$91.00 | Advance Deposits | Amount owed to U.S. Marshal or \$45.00 | Amount of Refund |
|-------------------------------|---|----------------|---------------------------------|------------------|--|------------------|

REMARKS:

12/19/07 Personally served

EXECUTED
NOTE